

State of Washington

Application for a Water Right

OF ECOLOGY

Please follow the attached instructions to avoid unnecessary delays.

For Ecology Use

	- Control of	-	1231.007347	The same of the sa	
dutte o	March of the last	-	-	-++ c	
	EE		-	1	< 6
					76
	THE RESERVE	4 6 40	A STATE OF	AND THE PERSON NAMED IN	

ame	FTGA Timbe	erlands, LLC	2			tome Tel:()_		
failing Ad	ddress 2987	Griffin Ave.	<u> </u>			Work	Геl: <u>(36</u> 6	0) 802–558	1
ity Em	umclaw		State WA	_Zip+4_98022	2_+	FAX:	(360) 82	25-3492	
	2. CON e as above		PERSON '	TO CALL	ABOUT	THE A	APPLI	CATIO	N
ame <u>Jı</u>	ulie Stangell					Home Tel	:()		
ailing Ad	ldress		SAA			Work Tel:()_	<u>.</u>	
ity		S	StateZ	ip+4	_+	FAX:(_)		
elationshi	ip to applicar	nt	Land Mana	ager, Hancock	Forest Ma	nagement,	senior fo	orester_	
Section	3. STAT	EMENT	OF INTI	DNT					
cubic fee	et per second exceed 5000	l) from a □ : gallons per o	surface water lay for comn	nercial forest m	ground wa nanagemer	iter source	(check o	only one) fo	or the purpose(s) . ATTACH A
mber is r	not sufficient.			in acre-feet per			-		umber or a plat
							1 0		
Chec	k if the wate	r use is prop	osed for a sh	ort-term projec	ct. Indicat	e the perio	d of time	e that the w	ater will be need
Chec				ort-term project	ct. Indicat	e the perio	d of time	e that the w	ater will be need
			to		ct. Indicat	e the perio	d of time	e that the w	ater will be need
Section	From _	ER SOU	to			DWATE		e that the w	ater will be need
f SURFA ame the take, etc.	From _	ER SOULER and indicate write "unnace: Tolt Rive	RCE e if stream, symed spring,"	/ / / If pring, A	GROUN		R		
f SURFA fame the sake, etc.	From	ER SOU	rto e if stream, spaned spring, spring.	/ / / If pring, A	GROUN permit is	DWATE	R		
Section If SURFA Iame the sake, etc. 'unnamed Number of Source flo	From 4. WAT ACE WATE water source If unnamed, d stream," etc of diversions: ows into (name River	ER SOU	rto e if stream, spaned spring, spring.	/ / / If pring, A	GROUN permit is	DWATE	R		
Section If SURFA Itame the sake, etc. 'unnamed Number of Source flow Source	ACE WATE water source If unnamed, distream," etcof diversions: ows into (name River ION) e north-southorner:	ER SOUI ER and indicate write "unnac: Tolt Rive 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	e if stream, symed spring," of water):	pring, A	GROUN permit is ize & dept	DWATE desired for the of well (see the of diverse)	R):	well(
Section If SURFA Itame the sake, etc. 'unnamed Number of Source flow Source	ACE WATE water source If unnamed, distream," etcof diversions: ows into (name River ION) e north-southorner:	ER SOUI ER and indicate write "unnac: Tolt Rive 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	e if stream, symed spring," of water):	pring, A Si es in feet from	GROUN permit is ize & dept	DWATE desired for the of well (see the of diverse)	R)): sion or v	well(withdrawa	s).
Section If SURFA Iame the sake, etc. I'unnamed Number of Source floe Snoqualm LOCATI Enter the section of Diversion	ACE WATE water source If unnamed, d stream," etc of diversions: ows into (namie River ION e north-southorner: in 1: 930 fee	ER SOUI ER and indicate write "unna e:: Tolt Rive " in and east-vit south and section Section	e if stream, somed spring, brownship	pring, A Si es in feet from ast of NW con Range(E/W)	rner section	DWATE desired for the of well (see the of diversion 11)	R)): sion or v	well(withdrawa	s). I to the nearest is platted, complete
Section f SURFA fame the sake, etc. funnamed Number of Source floe Snoqualm LOCATI Enter the section of Diversion	ACE WATE water source If unnamed, distream," etc of diversions: ows into (name River ION e north-south orner: n 1: 930 fee	ER SOUI ER and indicate write "unna c:: Tolt Rive i me of body of and east-vert south and	e if stream, symed spring, br	If pring, A Si	GROUN permit is ize & dept	DWATE desired for the of well (see the of diversion 11)	R. Sion or v	well(withdrawa	s). I to the nearest is platted, complete ow:
Section of SURFA fame the sake, etc. dunnamed Number of Source floe Conoqualma LOCATI Enter the section con Va of Diversion	ACE WATE water source If unnamed, distream," etco of diversions: ows into (name River ION) e north-southorner: n 1: 930 fee	ER SOUI ER and indicate write "unnach: Tolt River 1 in and east-vent south and section 11	e if stream, somed spring, brownship	If pring, A Si es in feet from ast of NW con Range(E/W)	rner section	DWATE desired for the of well (see the of diversion 11)	R Sion or v If loca Lot	well(withdrawa	s). I to the nearest is platted, complete ow:
Section If SURFA Itame the sake, etc. I'unnamed Number of Source flo Snoqualm LOCATI Enter the section of Diversion 1/4 of SE For Ecology II	ACE WATE water source If unnamed, distream," etco of diversions: ows into (name River ION) e north-southorner: n 1: 930 fee	ER SOUI ER and indicate write "unna e:: Tolt Rive " in and east-vit south and section Section	re if stream, symed spring, reference of water): vest distance 1640 feet extra Township	If pring, A Si es in feet from ast of NW con Range(E/W)	rner section	DWATE desired for the of well (see the of diversion 11)	R Sion or v If loca Lot	well(withdrawa	s). I to the nearest is platted, complete ow:

ECY 040-1-14 Rev. 7/97 * * f

APPLICATION

Appl. No.: 5 /- 28285

Sec	ction 5. GENERAL WATER SYSTEM INFORMATION
A.	Name of system, if named: None
В.	Briefly describe your proposed water system. (See instructions.)
	Water will be drawn from at bridge or culvert using portable pump to fill a tank truck. Water will be used for vegetation control project to allow continued commercial forest management of property totaling more than 100,000 acres. Water will not be required from this source every year.
C.	Do you already have any water rights or claims associated with this property or system? ☐ YES ☑ NO PROVIDE DOCUMENTATION.
Sec	etion 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION
(Co	ompleted for all domestic/public supply uses.)
A.	Number of "connections" requested: Type of connection (Homes, Apartment, Recreational, etc.)
В.	Are you within the area of an approved water system? If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your County Health Department. (Homes, Apartment, Recreational, etc.) □ YES □ NO
Con	plete C. and D. only if the proposed water system will have fifteen or more connections.
C.	Do you have a current water system plan approved by the Washington State Department of Health? If yes, when was it approved? Please attach the current approved version of your plan.
D.	Do you have an approved conservation plan? If yes, when was it approved? Please attach the current approved version of your plan. □ YES □ NO
	ction 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION
(Co	omplete for all irrigation and agriculture uses.)
A.	Total number of acres to be irrigated:
B.	List total number of acres for other specified agricultural uses:
	UseAcres
	UseAcres
C.	UseAcres Total number of acres to be covered by this application:
C.	
D.	Family Farm Act (Initiative Measure Number 59, November 3, 1977, as amended by Chapter 237, Laws of 2001) Add up the acreage in which you have a controlling interest, including only: ‡ Acreage irrigated under water rights acquired after December 8, 1977; ‡ Acreage proposed to be irrigated under this application; ‡ Acreage proposed to be irrigated under other pending application(s).
	 Is the combined acreage greater than 6000 acres? Do you have a controlling interest in a Family Farm Development Permit? If yes, enter permit no:
E.	Farm uses: Stockwater - Total # of animals Animal type (If dairy cattle, see below) Dairy - # Milking # Non-milking

Section 8. WATER STORAGE		
Will you be using a dam, dike, or other structure to retain or store water?		□ YES □ NO
NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth some portion of the storage will be above grade, you must also apply for a reservoir application from the Department of Ecology.		
Section 9. DRIVING DIRECTIONS		
Provide detailed driving instructions to the project site.		
Highway 202 to Mill Pond Road to Mainline road to Gate 4. Please note a k	cey and	permit are required for access.
Mainline road to 24610 road, .25 miles to right		
Section 10. REQUIRED MAP		
A. Attach a map of the project. (See instructions.)		
Section 11. PROPERTY OWNERSHIP		
A. Does the applicant own the land on which the water will be used? If no, explain the applicant's interest in the place of use and provide	the nar	■YES □ NO me(s) and address(es) of the owner(s):
B. Does the applicant own the land on which the water source is located If no, submit a copy of agreement:	d?	₽ ÝES □ NO
I certify that the information above is true and accurate to the best of m to process my application, I grant staff from the Department of Ecology monitoring purposes. Even though I may have been assisted in the prepemployees of the Department of Ecology, all responsibility for the accurate to the best of m to process my application, I grant staff from the Department of Ecology monitoring purposes. Even though I may have been assisted in the prepemployees of the Department of Ecology, all responsibility for the accurate to the best of m to process my application, I grant staff from the Department of Ecology monitoring purposes. Even though I may have been assisted in the prepemble of the Department of Ecology all responsibility for the accurate to the best of monitoring purposes.	access paratio acy of	s to the site for inspection and n of the above application by the
Landowner for place of use (if same as applicant, write "same") Date of the control of the cont	te	

We are returning your application for the following reason(s):	
Examination fee was not enclosed	APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
Section number(s) is/are incomplete	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:	
Please provide the additional information requested above and return your	application by
(date).	
Ecology staff Date	
Ecology is an Equal Opportunity and Affirmative Action employer.	
To receive this document in alternative format, contact the Water Resonant	Dun amount of (260) 407 6604 (Main

APPLICATION

Use this page to continue your answers to any questions on the application. Please indicate section

number before answer.

or (360) 407-6006 (TDD).

